UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPR	
OMB Number:	3235-0076
Expires: April 30,	, 2008
Estimated average	burden
hours per response	16.00

14 30604

SEC USE ONLY					
Prefix		Serial			
DATE	RECEN	/ED			

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	SEC SEC STOCK Wat Progressing
Series C Preferred Stock and the Common Stock issuable upon conversion of such Serie	S C Preferred Stock. Was Production
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	<u>∾ • ♥ 🞖 🛈 ୨ନମ8</u>
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	Washington, DC 104
Razz, Inc.	i dent
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
208 Utah Street, Suite 210, San Francisco, CA 94103	(415) 626-2460
Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, State, Zip Code ROCESSED	Telephone Number (Including Area Code) Same as above
Same as above MAR 2 6 2008	
Brief Description of Business THOMSON	Design and the second
Mobile entertainment and technology company. FINANCIAL	
Type of Business Organization corporation limited partnership, already formed oth business trust limited partnership, to be formed	er (ple 08041933
· · · · · · · · · · · · · · · · · · ·	r other foreign jurisdiction) D E
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulet seq. or 15 U.S.C. 77d(6).	ation D or Section 4(6), 17 CFR 230.501
When To File: A notice must be filed no later than 15 days after the first sale of securities in the of U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC a that address after the date on which it is due, on the date it was mailed by United States registered or or	the address given below or, if received at
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C.	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be migned must be photocopies of the manually signed copy or bear typed or printed signatures.	anually signed. Any copies not manually
Information Required: A new filing must contain all information requested. Amendments need only any changes thereto, the information requested in Part C, and any material changes from the informat Part E and the Appendix need not be filed with the SEC.	report the name of the issuer and offering, ion previously supplied in Parts A and B.
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice vistate where sales are to be, or have been made. If a state requires the payment of a fee as a precondition the proper amount shall accompany this form. This notice shall be filed in the appropriate states in account the notice constitutes a part of this notice and must be completed.	vith the Securities Administrator in each n to the claim for the exemption, a fee in
ATTENTION	

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTI	FICATION DATA		
Each beneficial owr securities of the issue	e issuer, if the issumer having the power; er; er and director of o	er has been organized with wer to vote or dispose, or corporate issuers and of co	nin the past five years; r direct the vote or dispos rporate general and manag	ing partners of par	tnership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Malkin, Jeff	individual)				
Business or Residence Address	s (Number and Str Utah Street, Suite	eet, City, State, Zip Code) 210, San Francisco, CA	94103		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Kirschner, Jeffrey					
Business or Residence Addres	s (Number and St	reet, City, State, Zip Code 210, San Francisco, CA	94103		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if Borcher, Christian					
Business or Residence Addres	ss (Number and St are Capital, 1010	reet, City, State, Zip Code El Camino Real, Suite 25) 0, Menlo Park, CA 94025	i	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Roberts, Janice	individual)				
Business or Residence Addre	ss (Number and St , 2800 Sand Hill I	reet, City, State, Zip Code Road, Suite 250, Menlo P	art, CA 94025	_	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if Levin, Peter	f individual)				
Business or Residence Addre	ss (Number and St Utah Street, Suit	treet, City, State, Zip Code e 210, San Francisco, CA	e) A 94103		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i Bunch/Trask 2004					
Business or Residence Addre		treet, City, State, Zip Code te 210, San Francisco, CA		_	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i		ds			
Business or Residence Addre			e) 50 Menio Park, CA 9402	5	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		A. BASIC IDENTI	FICATION DATA		· · · · · · · · · · · · · · · · · · ·
 Each beneficial owne securities of the issuer 	issuer, if the issue or having the pover; rand director of c	er has been organized with wer to vote or dispose, or corporate issuers and of cor	direct the vote or dispos		- ,
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Garage Technology \)		nd affiliated funds			
Business or Residence Address 3300 Hillview Avenu					
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in SAC Participation G	,				
Business or Residence Address Ottobrunner Str. 41,	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in Mayfield XII and aff	•				
Business or Residence Address 2800 Sand Hill Road	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)		.		
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)			-	
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if ir	ndividual)				
Business or Residence Address	(Number and Str	eet, City, State, Zip Code)	··		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

						B. INFOR	MATION	ABOUT O	FFERING					
													Yes	No
1.	Has th	ne issuer s	old, or do	es the issu							•••••		Ц	\boxtimes
_									ling under U			c	NI/A	
2.	what	is the mir	ıımum ınv	estment th	iat will be	accepted if	om any ind	ividuai?	***************************************		••••••	»	N/A	
3.	Does :	the offeri	ng permit i	oint owne	rship of a	single unit	?						Yes ⊠	No □
					•	· -					or indirect			
(;	comm a pers states.	ission or on to be . list the i	similar rer listed is ar name of th	nuneration associate e broker	n for solici d person o or dealer.	itation of p or agent of If more th	urchasers ir a broker o	n connection r dealer reg persons to	n with sales istered with be listed ar	of securities the SEC an	s in the offer d/or with a l persons of	ring. If state or		
Full 1		(Last nan N/A	ne first, if i	individual)									
Busir	iess o	r Residen	ce Address	s (Number	and Stree	t, City, Sta	te, Zip Cod	e)				··· <u>-</u>		
Name	e of A	ssociated	Broker or	Dealer										
State	s in W	/hich Per	son Listed	Has Solic	ited or Inti	ends to Sol	icit Purchas	ers						
													□ Al	States
[A]	1	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	1
[][_	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	(MC	_
[M	-	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	-
[R]	-	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	_
Fuli	Name	(Last nar	ne first, if	individual)			<u>,,, , , , , , , , , , , , , , , , , , </u>						
		N/A												
Busir	ness o	r Residen	ce Addres	s (Numbe	r and Stree	t, City, Sta	te, Zip Cod	e)						
Name	e of A	ssociated	Broker or	Dealer										
							icit Purchas					*************	□ AI	l States
[AI	ա	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11	رً.	[IN]	[A1]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC)]
[M		[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	.]
[R :	[]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[P R	.]
Fuli	Name	(Last nar	ne first, if	individual)									
	Ī	N/A												
Busin	ness o	r Residen	ce Addres	s (Numbe	r and Stree	et, City, Sta	te, Zip Cod	e)						
Nam	e of A	ssociated	Broker or	Dealer								<u> </u>		
State	s in V	Vhich Per	son Listed	Has Solic	ited or Int	ends to So	icit Purcha	sers			<u></u>			
(C	heck '	"All State	s" or checl	k individu	al States)		•••••						☐ Al	l States
[A]	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11]	.]	[IN]	[A1]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MC)]
[M	T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[P A	.]
[R	I]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[P R	.]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Amount Already Aggregate Offering Price Sold \$-0-\$-0-Debt \$2,500,000.00 \$1,868,489.35 Equity □ Preferred Common Convertible Securities (including warrants) \$See above \$See above Partnership Interests..... \$-0-\$-0-Other (Specify _____) \$-0-\$-0-Total \$2,500,000.00 \$1,868,489.35 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors \$1,868,489.35 Accredited Investors 12 -0-Non-accredited Investors \$-0-Total (for filings under Rule 504 only)..... N/A \$N/A Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering Type of Dollar Amount Security Sold Rule 505..... SN/A N/A Regulation A N/A \$N/A Rule 504..... SN/A N/A Total N/A \$N/A Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees \$To be determined Accounting Fees..... \$ Engineering Fees. \$ Sales Commissions (specify finder's fees separately)..... Other Expenses (identify _____) \$

Total

STo be determined

	C. OFFERING PRICE, N	iumber of investors, expenses a	ND US	SE OF PROCEEDS	<u>s</u>	
Ç	uestion 1 and total expenses furnished in re-	ate offering price given in response to Part C - sponse to Part C - Question 4.a. This differen	ce is th	ne	s	2,500,000.00
u e	sed for each of the purposes shown. If the stimate and check the box to the left of the	gross proceeds to the issuer used or propose e amount for any purpose is not known, funestimate. The total of the payments listed mustorth in response to Part C - Question 4.b. above	nish aı it equa	n		
				Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees	•••••••••••••••••••••••••••••••••••••••		\$-0-		<u>\$-0-</u>
	Purchase of real estate			-0-		-0-
	Purchase, rental or leasing and installation	on of machinery and equipment		S-0-		\$-0-
	Construction or leasing of plant building	gs and facilities		\$-0-		\$-0-
	Acquisition of other business (including offering that may be used in exchange for issuer pursuant to a merger)	the value of securities involved in this or the assets or securities of another		S-0-	П	\$- 0 -
	•		_	\$-0-		\$ - 0-
	• •		_	\$-0-	Ø	\$2,500,000.00
	Other (specify):	· · · · · · · · · · · · · · · · · · ·	_			
				\$ <u>-0-</u>		\$
				\$-0-	\boxtimes	\$2,500,000.00
	Total Payments Listed (column totals ad	lded)		\$2,500,000.00		
		D. FEDERAL SIGNATURE				
llow	ing signature constitutes an undertaking by	ned by the undersigned duly authorized pers the issuer to furnish to the U.S. Securities and any non-accredited investor pursuant to parag	l Exch	ange Commission, 1	d un upon	der Rule 505, the written request o
suer	(Print or Type)	Signature		Date		
azz,	Inc.	Mely		February $\frac{29}{2}$, 20	08	
ame	of Signer (Print or Type)	Title of Signer (Print or Type)				
es R	To Drin	Busident and CEO				

END

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)